

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12°, Ste, 1A



2008 JUL 18 PM 2: 14

Des Moines, Iowa 50319 Fax: 515-281-4073	FOR INSTRUCTIONS, DISCLOSURE S	SEE BACK OF FORM UMMARY PAGE		
COMMITTEE NAME (Must be s	same as on Statement of Organiz			
Friends F IMPORTANT: Indicate by # type of (1) Statewide/Legislative/Judge Sta (4) County Central Committee (5) (6)	Joseph Schultz	tate PAC (3) State Party	FORM DR-2 (Rev. 07/2007) For Office Use O	DISCLOSURE REPORT
CANDIDATE COMMITTEES OF Candidate Name  OSON Schult?  Office Sought  House of Repr	2	Political Perty (if applicable)  Republican  District (if Senate or House)  55	Logged in Scenhed Computer Audited	V K 8 7.08
Late reports are subject to possible	civil and criminal penalties. Pursua	(712) (27(2 - 2109) TELEPHONE	(7) and 68A,401(3), the co	08
AM FILINGA MON 1	9th, 2008	REPORT FOR (1) ELECTION	//2)NON-ELECTION YE	AR.
	rt date)	Indicate by #	The state of the s	
CHECK IF AMENDMENT TO	REPORT DATED May 1	gtm. 2008	Local Committees, enter Da	ate of Election
	on) report and attach Notice of Di le reports until a DR-3 is filed,)	The state of the s	County & Local Committees which Election is held	i, enter County in
STATEME	NT OF CASH ON HAND			
committee. This amour	g of the reporting period. (Total of MUST be the same as the cash od or must be zero if this is first re	on hand at the end	.s 7.9	83.34
	AKEN IN THIS PERIOD			
Schedule A: Cash Con	tributions total (Attach Schedule	A) (*also see in-kind below)	2,2	64, <sup>00</sup>
The second secon	ceived total (Attach Schedule F)		<u> </u>	
Schedule H: Total Sale	s of Campaign Property (Attach S	Schedule H)		
(Schedule H a	pplies to Candidates' Committe	eee Only) 10 (udes sub-total	\$ 10,19	7.34
SUBTRACT TOTAL M	ONEY SPENT THIS PERIOD	2,35 adjusting en	_	88
Schedule B: Expenditu	res total (Attach Schedule B) (**a	iso see debts and loans below)	<u> 4253</u>	<u>}.                                    </u>
Schedule F: Loan Repa	ayments total (Attach Schedule F	)		- 07.
CASH ON HAND at the end of th	is reporting period (if final report i	balance must be zero)	5 <u>5,94</u>	13.40
"UNPAID BILLS (From Schedul	e D - Attach Schedule D)		\$	
	om Schedule E - Attach Schedule			
	Schedule F - Attach Schedule F		s	
CONSULTANT BREAKDOWN (			YES	NO
CANDIDATE COMMITTEES ON	<u>LY:</u>			
VALUE OF CAMPAIGN PROPE	RTY (From Schedule H - Attach S	Schedule H)	\$	
STATE COMMITTEES: Submit	a reconciled campaign account b	ank statement in January of each	ı year.	

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12<sup>th</sup>, Ste. 1A
Des Moines, Iowa 50319



510 E. 12 <sup>th</sup> , Ste. 1A  Des Moines, Iowa 50319	FOR INSTRUCTIONS, SEE BACK OF FORM	CAMI	A ETHICS AND
Fax: 515-281-4073	DISCLOSURE SUMMARY PAGE	2008	MAY 19 AND
COMMITTEE NAME (Must be	e same as on Statement of Organization)		- 1.2 HIJ 10: [13
Friends of	- Sason Schultz	1 1	FORM
IMPORTANT: Indicate by # type	of committee you are reporting for:	1 1	DR-2 DISCLOSURE REPORT
(4)County Central Committee (	Standing for Retention Candidate(2 )State PAC(3 )State Party 5 )County Candidate(6 )City Candidate(7 )School Board or Other Political	ı     <u> </u>	
Subdivision Candidate (8)Coun 11) Local Ballot Issue	ty PAC (9) City PAC (10) School Board or Other Political Subdivision PAC	(   FG	or Office Use Orlly
CANDIDATE COMMITTEES	ONLY:		omm. # 17)
Candidate Name	Political Party (if applicable)	1 1	canned
Jason Schultz		Co	omputer W/V
Office Sought	District (if Senate or House)	Au	udited
House of Represe	entatives HD55		6 pages
Late reports are subject to possi	ble civil and criminal penalties. Pursuant to lowa Code sections 68B.32A	(7) and 68.	A.401(3), the candidate, for a
Same Al	(712)269-2178		5/15/08
SIGNATURE OF PERSON FIL			DATE SIGNED
	REPORT FOR (1) ELECTION Indicate by #		ELECTION YEAR.
CHECK IF AMENDMENT T	O REPORT DATED	Local Com	mittees, enter Date of Election
		County & Low which Elect	ocal Committees, enter County in tion is held
STATEM	L ËNT OF CASH ON HAND		
CASH ON HAND at the begins committee. This amo	ning of the reporting period. (Total of all funds held by the bunt MUST be the same as the cash on hand at the end period or must be zero if this is first report filed.)	\$	7.933. <sup>34</sup>
	Y TAKEN IN THIS PERIOD	•	7,933.34
	ontributions total (Attach Schedule A) (*also see in-kind below)		2264.°°
	Received total (Attach Schedule F)		
	ales of Campaign Property (Attach Schedule H)		
	l applies to Candidates' Committees Only)		10.0-34
	SUB-TOTAL	\$	INTO I
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD		4.251.63
Schedule B: Expend	itures total (Attach Schedule B) (**also see debts and loans below)		4,251.65
Schedule F: Loan Re	epayments total (Attach Schedule F)		
CASH ON HAND at the end of	this reporting period (if final report balance must be zero)	\$	5,945.71
	dule D - Attach Schedule D)		
	From Schedule E - Attach Schedule E)		
	om Schedule F - Attach Schedule F)		
CONSULTANT BREAKDOWN		Ψ	YES NO
CANDIDATE COMMITTEES			
	PERTY (From Schedule H - Attach Schedule H)	\$	
	nit a reconciled campaign account bank statement in January of each	• • • • • • • • • • • • • • • • • • • •	
	, c	,	

### For Instructions, See Back of Form

(Including candidate's personal funds)

**CONTRIBUTIONS -- MONEY TAKEN IN** 

Reset Form	SCHEDULÉ	
	<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
	_	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)	
Friends of Jason Schultz	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOI FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)	1,202,123	RAISEF
1-19-08	CK# <b>5951</b>	Beverly Fredericks		\$56.00	
	ID#	POBOX 37, Denison, IA 51442 Don Wunshel	<b>*</b>	<b>Jw</b> .	
1-22-08	ск#12730	Pobox 222, IdaGrave, IA 51445		100.00	
1-25-08	CK# <b>1012</b>	CW Architecture Inc 1023 E Maryland Ave, Phoenix AZ 85016		15000	
	CK#	Check Returned from CW Sch B Architecture, CK#1012 - See Sch B			
2-5-08	CK# <b>1691</b>	Larry & Anna Abbe 2351 A Ave, Schlesung, FA, 51461		50.00	
Z-S-08	ID# CK# <b> 643</b>	Leon & Phyllis Clausen 1121 Roth St. schlesnig. IA 51461		56.00	
2-6-08	ID# CK# <b>4066</b>	TimaLila Bubke 1016th St. Schlewig. FA 51461		56.00	
z.6-08	ck# Cash	Mike Goodin POBOX 0368, Schlesung, FA 61461		100.∞	
2-8-08	ID# CK# <b>\(OC</b> )	Dale Scierce 109 Wmaintst. Ute, IA 51060		100:00	
2-8-08	ID# СК# <b>Ц77 I</b>	Steve Vary 1914 Q Ave. Arion, IA SISZO		100.00	
		TOTAL (if last page	SUB-TOTAL	\$ 768.00°	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

## For Instructions, See Back of Form

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF

COMMITTEE	NAME (	Must b	e same as or	n Statement of Organization	1)
Trie	ends	04	Sason	Schultz	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)	RECEIVED	FUND- RAISER INCOME
2-15-08	ID#	Mark bearard.		0.1.00.00	
	CK# 4031	1302 Huy 59, Holstein, IA 51025		\$ 100.00	
2-15-08	ID#	Don Davenport		200,00	
	CK# <b>3485</b>	3220 Orchard Ave, Ida Eurove, IA 51445		;	
2-21-08	ID#	DL Schmidt DVM		100.00	
	ск# 6447	704 Geder St. Schleswigt 4 SINGE		1.00.	
2-12-08	ID#	Kim Conover		56.00	
	CK# 1229	1932 Faith Ave. Holstein, It 4 51025			
2-23-08	ID#	C. Petersen		100.00	
	CK# 7521	Schlawig. F4 SULL			
3-1-08	ID#	Barry Bergman		500.00	
_	ск# <b>6848</b>	2866 Quail Ave, Author, IA SIY61			
3-13-08	10#9047	Crawfold County GOP		Z00.00	
	CK# 1142	101 Gth St. Schlawig, 51441			
3-22-08	ID#	John Bahnsen		20.00	
	CK#	John Bahnsen 25048 182ndst Spiritlake, #A 51360			
3-23-08	ID#	Donna Weiss		20.00	
	CK# Cash	203 School St. DOW City, IA 5/578			
4-10-08	ID#	Larry & So Ann Clausen		50.∞	
	ck# <b>7805</b>	914 6th St. Schleswig, IA SIMUI			
		981346.00	SUB-TOTAL	s 2114	

TOTAL (if last page of this schedule)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

Reset Form

SCHEDULE	
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAM	E (Must be same as on Statement of Organization)	
Friend:	of Jason Schultz	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4-19-08	ск# <b>8473</b>	Shirley Kastner 2304 9th St. Denison IA 51442 Goodon Boerner 144 Easter Ct. The Grove, FA. 51445		\$ 5000	
4-72-08	CK# Cash	Gordon Boerner 144 Easter Ct. Fda Grove FA. 51445		100.00	
	ID# CK#				
	ID#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID#		, , , , , , , , , , , , , , , , , ,		
	ID# CK#				
VAN BASK-	ID# CK#				
			SUB-TOTAL	15000	

TOTAL (if last page of this schedule)

\$2264.00

Page S of 3 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Folia

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES	
CHECK THIS BOX IF		

COMMITTEE NAME	(Must be same	as on Statemen	t of Organization
	4		

Triends of Jason Schultz

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2.29.08	ID# CK# <b>I035</b>	Reynolds 13231310adway St. Denison F.4 S1442	Logo Printing on Shirts	42.69
3.15.08	ID# CK# 1036	Walmort 404 Arrowhead Dr. Denison, IA 51442	Parade Materials/Candy	45.13
4.8.08	ID# СК# <b>IØ37</b>	Victory Enterprises 5200 5W 30th St. Ste7 Dwenpo4, IA 52808	Door Magnets	138.05
4.8.08	CK# <b>1038</b>	OP Printing 7010 Perk Ave. Muscettine, IA 52761	Sign Request mailing OPC 4 Postage	810.23
4-17-08	ID# CK# <b>/039</b>	Post master 198 Ceder st Schleswig. I.A. SIYEI	Postage	17.03
4-17-08	ID# CK# <b>[040</b>	Post-master 198 cedar st. Schlemig, IA SIY(e)	Postage	15.16
4.25.08	CK# <b> O4 </b>	Victory Enterprises 5200 & W 30th 51. Ste. 7 Davenport, T.J., 5280B	Yard/Barn Signs	2,023.20
4.28.08	ID# CK# <b>/042</b>	Something Unique 579 Huy 39 N. Denison, IA	Campaign Polos	21.29

SUB-TOTAL \$ 3112.78

TOTAL (if last page of this schedule)

\$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
<b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTE	E NAME (Must be	e same as on Statement of Organization)		
		of Jason Schultz		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4.30·08	ID# CK# <b>\043</b>	Of Orinting 2610 Bull Ave. Muscahiu, IA 52741	Printing/ Notepord production	<b>289.40</b>
4.30.08	CK# louu	CW Architecture 1623 Manyland Ava Phones AZ 85016	Returned Check Debit, CEH LOIZ (See schedule A)	150.00
5-1-08	CK# 1045	OP Printing ZGIO PEK ANE MUSCOTINE, IA 52761	Brochure printing & production	699.25
	ID# CK#			
			SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	\$ 4251.1.3

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page		of _	Z
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4251.63